

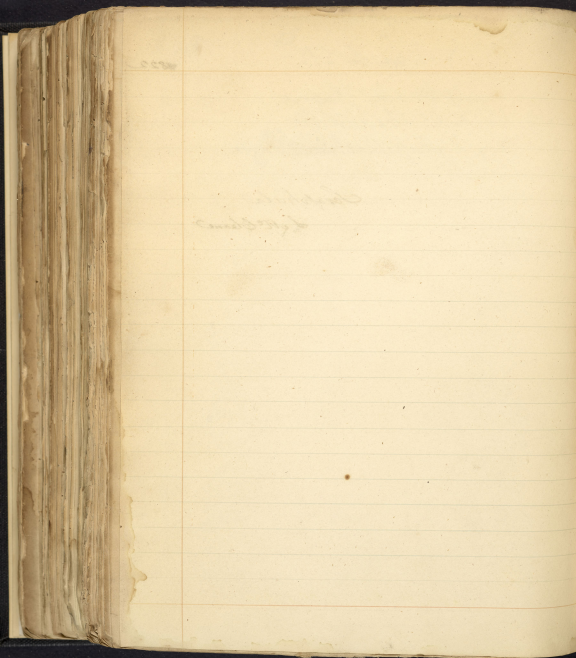
35 March 5th -

1822

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Scaphula

L. McCleane



An
Inaugural Essay
on
Scrophula

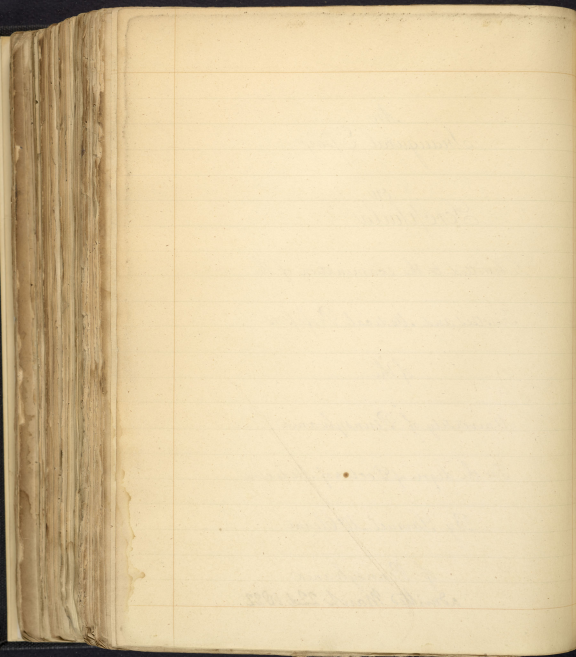
Submitted to the examination of the
Trustees and Medical Professors
of the

University of Pennsylvania

For the degree of Doctor of Medicine

By Samuel McClean

of Pennsylvania
admitted March 22d 1822

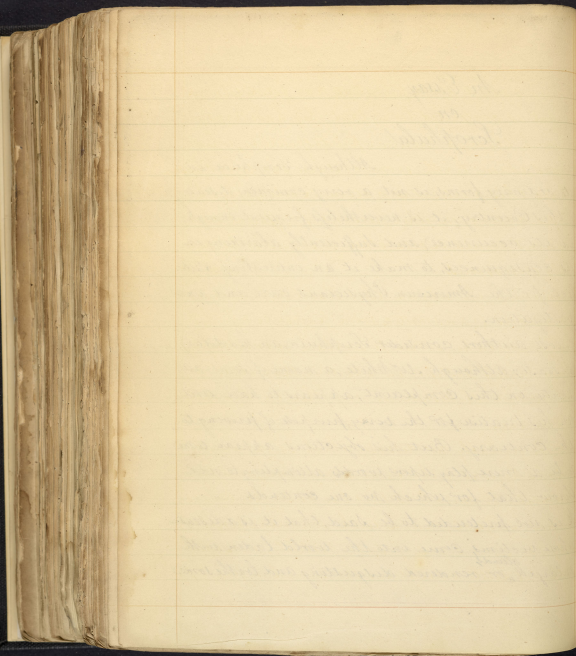


An Essay
on
Scrophula

Although Scrophula in its ordinary forms, is not a very common disease of this Country, it is nevertheless frequent enough, in its occurrence, and sufficiently alarming in its consequences, to make it an interesting subject for the American Physicians care and investigation.

Most authors consider Scrophula, an hereditary disease; although W. White, a name of some authority in this Complaint, appears to have written his treatise for the very purpose of proving to the contrary. But his objections appear to me to be a mere play upon words, attempting to overthrow that for which no one contends.

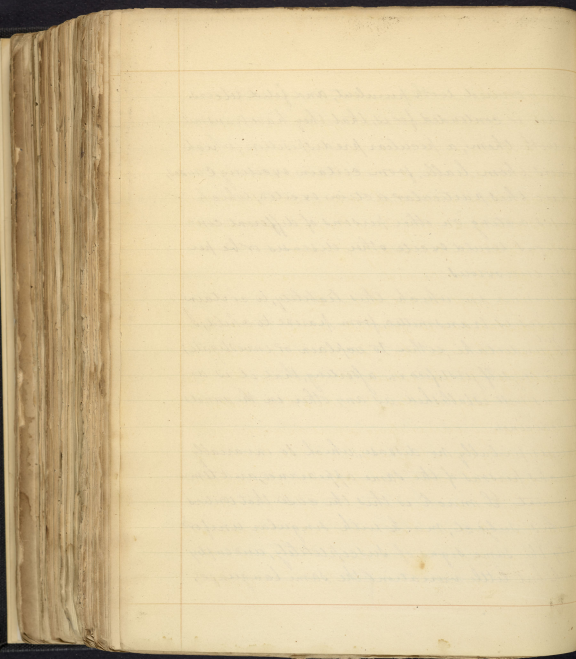
It is not pretended to be said, that it is a disease whose victims, come into the world laden with enlarged ^{glands}, or rendered disgusting and loathsome.



by being covered with purulent, and fetid ulcers.
All that is contended for is, that they have transmit-
ted with them, a peculiar predisposition, which
renders them liable, from certain exciting causes,
to have this particular action excited, which
causes, acting on other persons of different con-
stitutions would excite other diseases or be per-
fectly innocuous.

The manner in which this liability, to certain
diseases is transmitted, from parent to child, I
shall ^{not} undertake, either to explain or investigate;
feeling myself justified in asserting, that it is a
fact as well established as any other in the annals
of medicine.

There is probably no disease, which so invariably
attacks persons of the same appearance, and tem-
perament. So much is this the case that writers
on this subject, mark with singular unifor-
mity the same signs of susceptibility, and employ
with but little variation the same language,

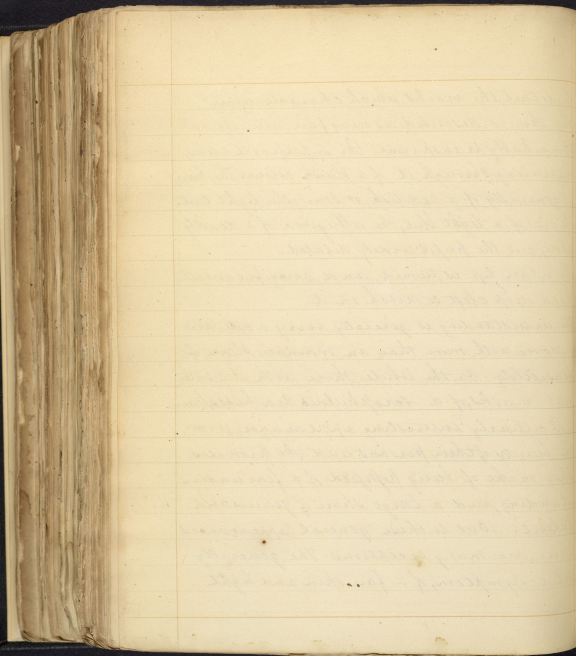


to detail the marks which characterize it.

The skin is described as being fair, delicate, and remarkably transparent, the superficial veins, appearing through it of a bluish colour. The hair, is generally of a reddish, or some other light tint. The eyes of a light blue, the albuginea of a deadly white, and the pupil widely dilated.

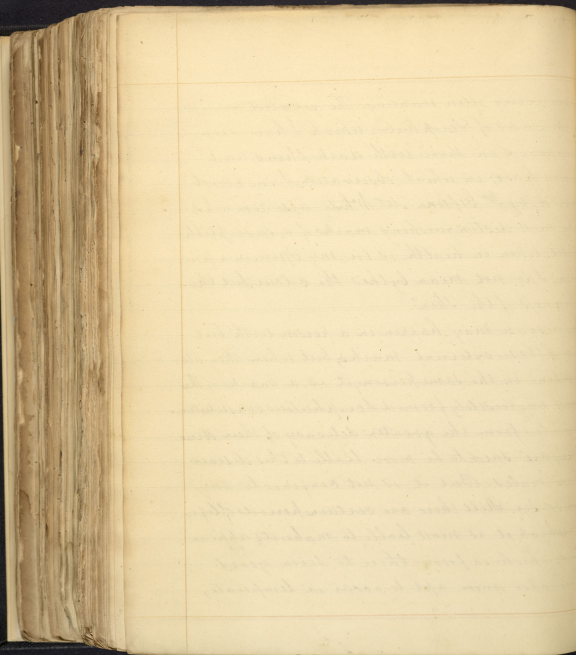
The upper lip is tumid, and very frequently, has a deep cleft or notch in it.

The understanding is generally very acute, and endowed with more than an ordinary share of sensibility. On the whole those with the external marks, of a scrophulous diathesis, have a peculiarly interesting appearance, from the beauty of their persons, and the promises they make of being possessed of a fine understanding, and a large share of genius and talent. But to these general appearances, there are many exceptions. The generally cited symptom, of a fair skin and light.



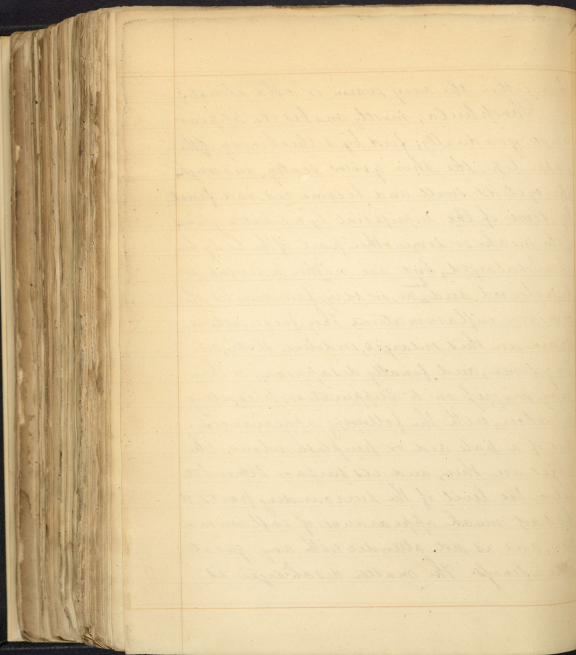
hair being often wanting. The greatest number of the cases of Scrophulous, which I have seen, happened in those with dark skins, and brown hair; in which observation, I am corroborated by ^{Dr} Gibson. Mr. White also remarks "The most distinguishing marks of a susceptible habit, when in health, is in my opinion a fine skin; I do not mean by this the colour, but the thinness of the skin".

The disease may happen in a person with but few of these external marks, but when they all combine in the same person, it is a mark of the most exquisitely formed Scrophulous constitution. Females from the greater delicacy of their structure, are said to be more liable to this disease than males. But it is not confined to any age or sex. Still there are certain periods of life, at which it is most liable to make its appearance, which is from three to seven years. It is also more apt to occur in temperate,



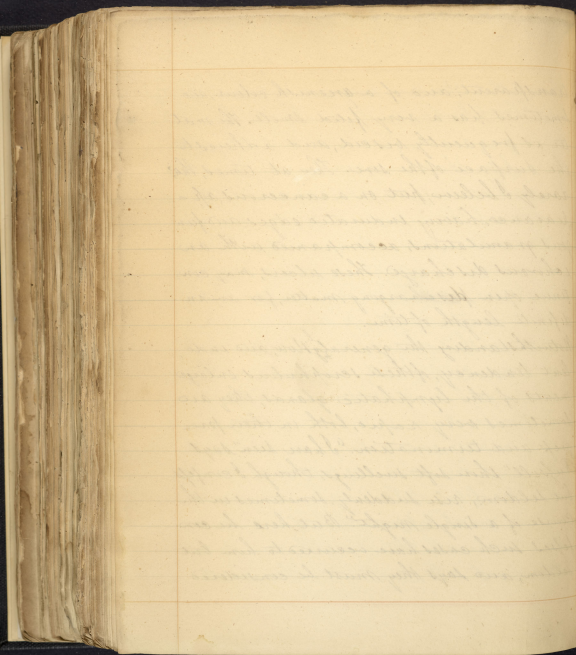
than either the very warm or cold climates.

Scrophula, mostly, makes its appearance gradually; first by a thickening of the upper lip, the skin grows scaly, and, next, the eyelids swell and become red, and finally some of the superficial lymphatic glands of the neck or some other part of the body become enlarged, but are neither painful or discoloured and ^{have} no, or very few, marks of common inflammation. They frequently remain in this enlarged, indolent state, a long time, and finally disappear; or they may progress on to suppuration, presenting an ulcer, with the following appearances. It is of a pale red or purplish colour, the edges are thin, and its surface somewhat below the level of the surrounding parts, it has not much appearance of inflammation, and is not attended with any great uneasiness. The matter discharged is



transparent, and of a greenish colour, and sometimes has a very fetid smell. The matter is frequently viscid, and adheres to the surface of the sore. They at times, tho' rarely I believe, put on a cancerous appearance, having indurated edges and fungous granulations, accompanied with an ichorous discharge. These ulcers, may continue open ~~discharging~~ matter, for an indefinite length of time.

Notwithstanding the generally slow, and indolent tendency, of these scrophulous enlargements of the lymphatic glands, they are sometimes very rapid, both in their progress and termination. "I have seen" says Russell "thin soft swellings, though I confess but seldom, rise suddenly. Sometimes in the course of a single night." But here he confesses such cases have occurred to him but seldom, and says they must be considered



as exceptions to a general rule. Thus may a person, be affected with these ulcers, every year for a number of years, breaking out in the Spring, and healing too ^{the end of} summer, untill they finally disappear altogether.

Such is an account, of the mildest case of Scrophula we meet with, and is unfortunately the least common.

This disorder is more frequently highly painful, and disagreeable in its progress, and still more melancholy in its termination, according to the part in which the stimulus action is located. These ulcers by their long continuance often extend to the bone causing painful and tedious exfoliations. When they occur in the neighborhood of a joint as they very frequently do, we have one of the most lingering and troublesome affections, with which the surgeon has to contend.

In these cases the joint enlarges, & extreme

ly, painful and after a while the swelling, bursts and discharges a great quantity of matter, without diminishing the size of the part. The ulcers formed in these cases, are frequently the most difficult to distinguish, from those caused, by the common phlegmonous inflammation, of any resulting from the scrophulous action. In making up our diagnosis, we are to take into consideration the history of the case - the appearance of the patient, and the nature of the discharge.

In this state they remain a long time, attended by a profuse discharge, and continued irritation, leaving the practitioner in constant anxiety, and doubt whether he shall continue his local, and general remedies, or lop off the limb, to save his patient from the direful effects of hectic fever.

If it should be the patients good fortune, to have his ulcers healed, he is left with a joint un-

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naturally enlarged and crippled in its motions.

The Mesenteric glands, in this disease are almost invariably in a disordered state, which is characterised by a weak debilitated state of the system, mostly termed cachectic. The patient on the slightest ~~on the slightest~~ exercise, will complain of the greatest fatigue and exhaustion, the pulse is weak frequent and quick, and the bowels either distended with large accumulations of faeces, or affected with an unceasing diarrhoea.

But I believe the most frequent, as well as the most fatal seat of the disease in this country, is the Lungs; and as it occurs most frequently in those, who on many accounts must be very dear, to the feeling Physician, I shall dwell on it at some length.

Scrophula, although acknowledged to be a very frequent cause of tubercular consumption by many authors, has not been made by

any whose works I have examined the subject of particular consideration.

Cullen considers a scrophulous constitution, one of the most frequent causes of Phthisis, for several reasons, viz. Its so generally occurring, when there is a Scrophulous diathesis, its so frequently being produced by tubercles, and it is so often coexistent, with a scrophulous affection of some other part of the body.

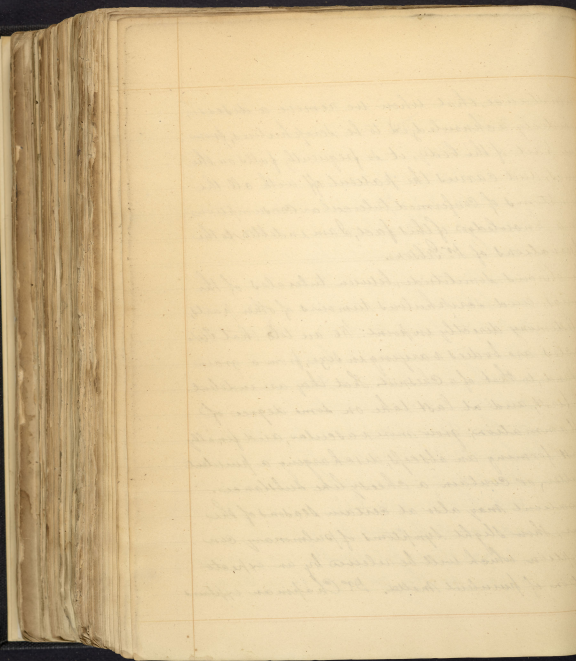
He also says it is apt to occur, in persons whose parents had in some part of their life, been affected with Scrophula in some of its forms, or had shewn a disposition to it.

And further, its victims have the external marks of a scrophulous disposition, such as "fine skin, ruddy complexion, large veins, soft flesh, and thick upper lip". This would appear to be evidence sufficient, to establish, the intimate connection between the two diseases. But we have further evidence, from the cir

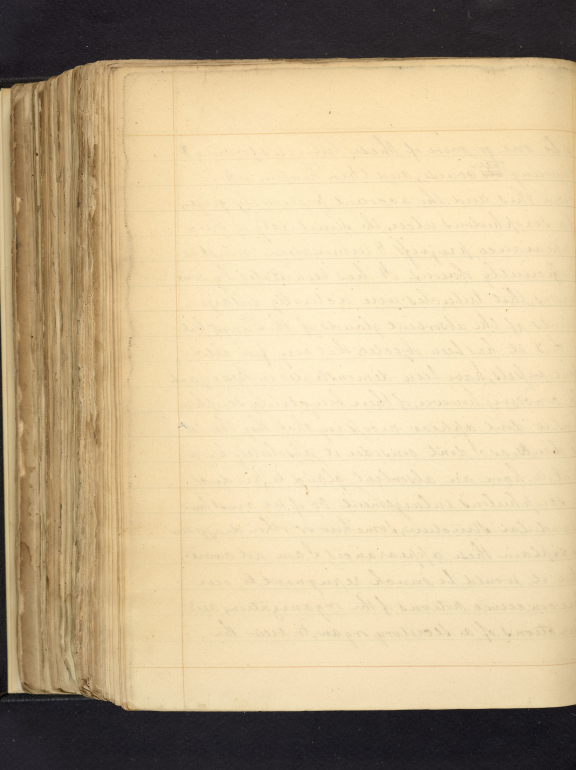
circumstances, that when we remove a disease, decidedly acknowledged to be scrophulous, from any part of the body, it so frequently falls on the lungs, and carries the patient off with all the symptoms of confirmed tubercular consumption. For a knowledge of this fact, I am indebted to the observations of Dr. Gibson.

The obvious similitude, between tubercles of the lungs, and scrophulous tumours of other parts, is testimony directly in point. We are told that Tubercles are bodies varying in size, from a grain of sand, to that of a Chestnut. That they are indolent at first, and at last take on some degree of inflammation; grow more vascular, and finally burst forming an abscess, discharging a purulent matter, or contain a cheesy like substance.

A patient may also at certain seasons of the year, show slight symptoms of pulmonary consumption, which will be relieved by an expectoration of purulent matter. Dr. Chapman explains

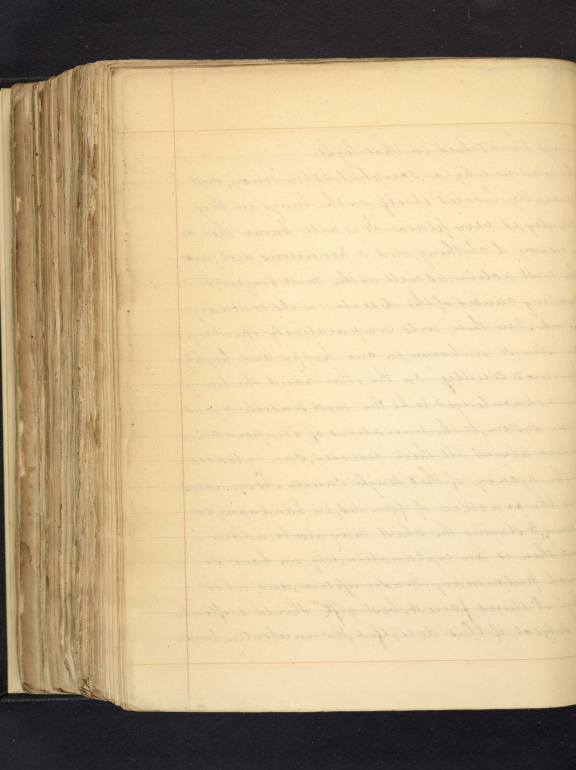


^{this} to be one, or more of these tubules forming &
running ~~the~~ ^{their} course, and then healing up.
From this and the account previously given,
of a serophulous ulcer, the similarity of their
appearance, progress, & termination must be
sufficiently obvious. It has been stated by some
persons, that tubules were actually enlarge-
ments of the absorbent glands of the Lungs; but
to this it has been objected, that very few absor-
bent vessels, have been demonstrated in these organs.
To conceive, however, of their being truly serophu-
lous, it does not appear necessary that they should
be glands, as I don't consider it absolutely essen-
tial, to have an absorbent gland to produce
a serophulous enlargement. Or if we must have
glandular structures, somehow or other dragged in
to explain these appearances, I am not aware
that it would be much repugnant, to our
preconceived notions of the organization, and
functions of a secretory organ, to view the



lungs themselves in that light.

The reason why a scrupulous tendency, most generally located itself on the lungs in this country, is very plain. It is well known that deficiency of clothing, and a penurious diet, are the most active, as well as the most frequent exciting causes of the disease in its ordinary forms. Now these evils comparatively speaking, are almost unknown, in our happy and highly favoured country. On the other hand the lungs are acknowledged to be the most sensible organs of our system, to the variations of temperature. Indeed almost all their diseases, can be traced to the agency of this single cause. As an accessory the practice of females, in bandaging, corsetting, & staying the chest may also be added. Here then is an explanation, why we have so much pulmonary consumption, and also why, "Nature's fairest, best gift" should so often be the subject of this deceitful, tho' unrelenting disease.



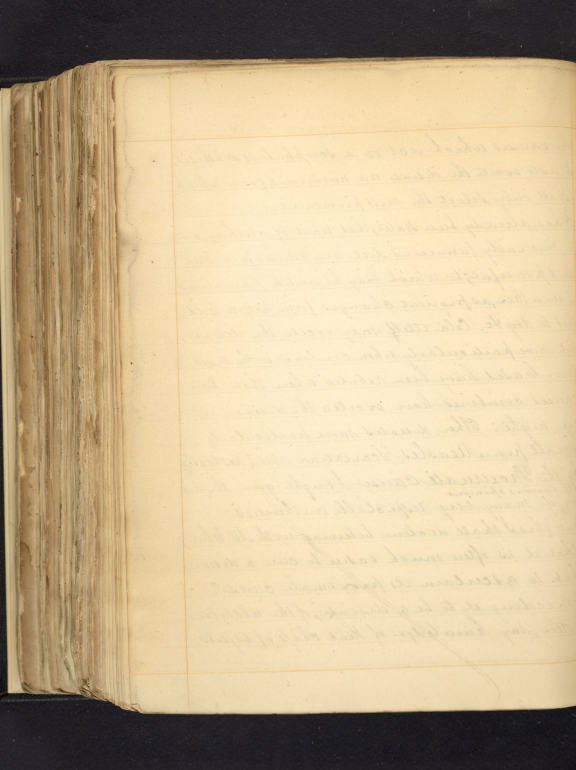
The causes which act on a scrophulous diathesis, so as to excite the disease are numerous, from which I shall only select the most prominent.

It has already been stated, that want of clothing, and a miserably penurious diet are causes frequent and powerful; to which may be added, variations of weather, as frequent changes, from hot to cold, wet to dry &c. Cold itself may excite the disease, but more particularly when combined with moisture. Cases have been related where these two causes combined have excited the disease in one night: Other diseases more particularly,

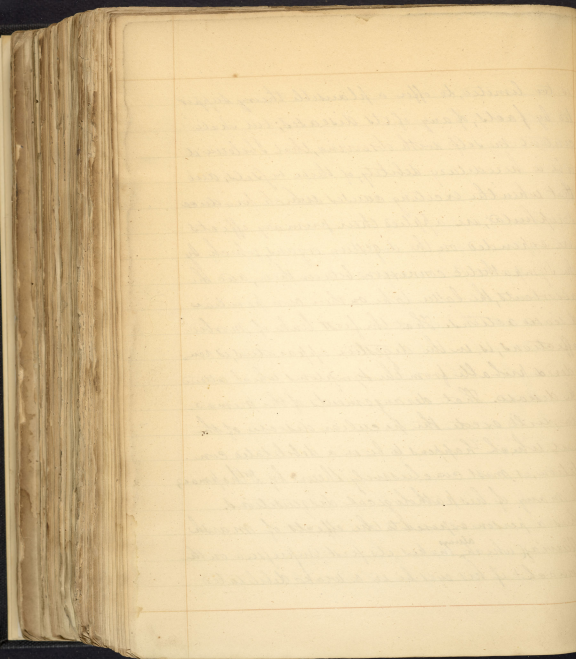
Small pox, Measles, Scarlatina and Lues venerea.
On the Proximate Cause. I might give the list
^{of the various opinions}
of many very respectable authorities.

But this I shall decline believing with W. White,
"that it is often much easier to cure a disease,
than to ascertain its proximate cause."

Conceding it to be a disease, of the absorbent
system, my knowledge of that class of vessels,



is too limited, to offer a plausible theory supported by facts, of any of its diseases; but shall content myself with observing, that I believe it to be a hereditary debility, of those vessels, and that when the exciting causes which produce Scrophulous, are applied their primary effects are expended on the digestive organs, which by the Sympathetic connexions between these, and the absorbents, the latter take on their own peculiar disease actions. That the first link of morbid affections, is in the digestive apparatus, is rendered probable from the symptoms which attend the disease. That derangements of the primæ viæ, will excite the peculiar diseases of the part which happens to be in a debilitated condition, is must conclusively shewn by Dr. Chapman, in many of his pathological disquisitions. Thus a person exposed to the effects of marsh effluvia (which ^{always} makes its first impression on the Stomach) if his eyes be in a weak debilitated



condition, he is affected with ophthalmia, or
if the joints be predisposed to disease, we have a
case of Rheumatism. On the same principle, does
costiveness excite Chorea, Epilepsy, Hysteria &c.
the nervous system being in an excitable state.
This opinion of the disease, I think is supported not
only by the symptoms of the disease, and by the true-
est medical analogy, but also by the very highest
Authority.

Treatment

Like all other diseases of a specific
nature, the cure of Scrophula was thought in
some measure to depend on specific remedies.
Consequently we find, that the treatment was
conducted for a long time, on precepts as
then empirical.

Specifics are now discarded, and the celebra-
ted remedy, of the "Kings touch" lies quietly
beside its scarcely less celebrated subject the

minute of time.

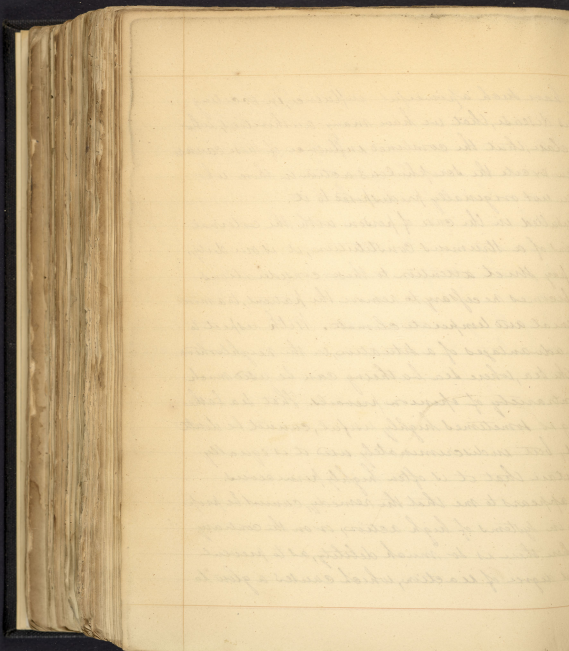
In detailing the method of cure, which I shall recommend, it will be divided into the general and local.

Among the conclusions which Mr. Lloyd draws from his observations on the disease, we find the following. viz. "That the disease may generally be prevented, by avoiding all the exciting causes, which have a direct influence in disturbing the general health."

"And that the disease is only to be cured, by avoiding all sources of irritation, and by restoring the natural and Healthy functions of the digestive organs"

These conclusions may be made the foundation, of the two general indications to be observed, in the treatment not only of those, who are predisposed to the disease, but also when it is actually excited.

Climate and Temperature, are acknowledged

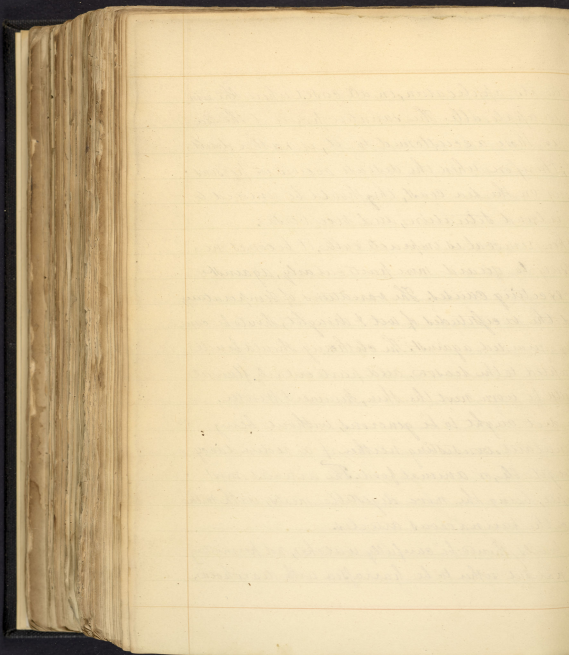


to have such a powerful influence, in exciting this disease, that we have many authorities, who declare, that the combined influence of these causes often excite the scrophulous action in those who were not originally predisposed to it.

Consulted in the case of person with the external signs of a Strumous Constitution, it is our duty, to pay strict attention to these considerations.

It becomes necessary to remove the patient, to a more genial and temperate climate. With respect to the advantages of a situation, in the neighborhood of the sea, where sea bathing can be used much contrariety of opinion prevails. That sea bathing is sometimes highly useful, cannot be doubted, but indiscriminately used it is equally certain that it is often highly pernicious.

It appears to me that the remedy, cannot be proper in systems of high action, or on the contrary, where there is so much debility, as to prevent that degree of reaction, which causes a glow to

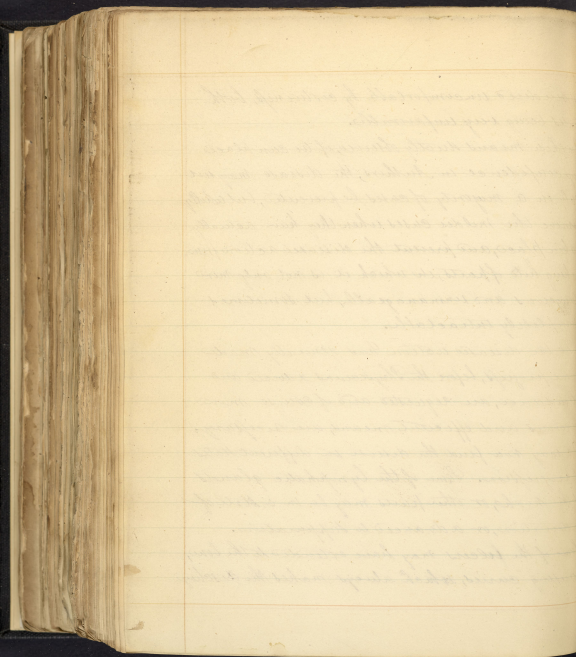


follow its application, in all cases where the remedy is applicable. The sanative power of the sea air in those accustomed to it, is rather doubtful; therefore when the disease occurs in persons living on the sea coast, they should be removed to an inland situation, and vice versa.

When removal is impracticable, it becomes necessary to guard more particularly, against the exciting causes. The variations of temperature, and the vicissitudes of wet & drought, should be carefully guarded against. The clothing should be well adapted to the season, and particularly flannel should be worn next the skin, summer & winter.

The diet ought to be generous, without being stimulant, consisting neither of a redundancy of vegetable, or animal food. The articles must be proper, being the more digestible meats, with milk and the farinaceous articles.

The bowels should be carefully watched, not permitting the patient either to be harraressed with diarrhoea,

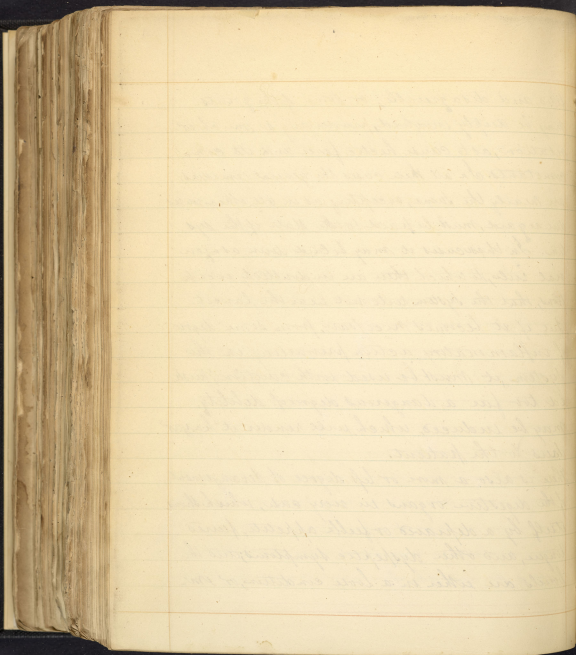


or rendered uncomfortable by costiveness, both states being very unfavorable.

By these means strictly observed, if we can place any confidence in Authors, the disease may not only in a majority of cases be prevented, but wholly remove the milder cases when they have actually taken place, and prevent the diseased action from taking into efforts, in which it is not only more dangerous and unmanageable, but sometimes completely intractable.

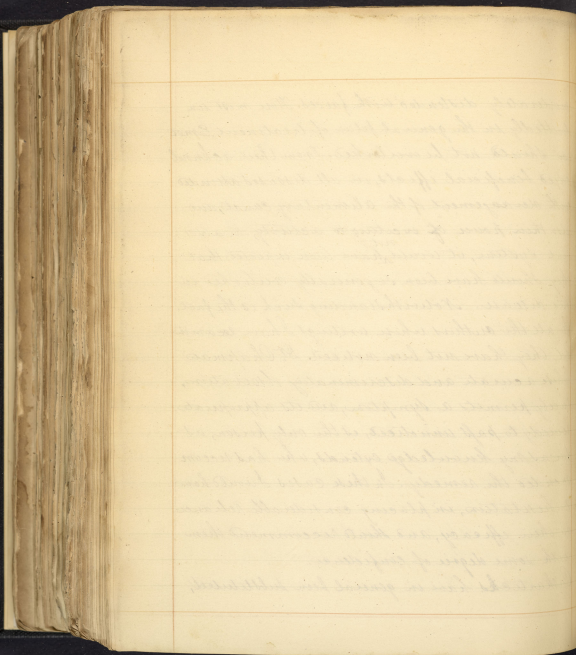
But the diseased action has generally made some progress, before the Physicians advice and attendance, are requested and of course more vigorous and efficient means, are necessary. We may now find the disease in different states of progression. Some of the lymphatic glands of the neck, or other parts may be in a state of inflammation, or advanced to suppuration.

Some of the ulcers may have extended to the bone, causing caries, which always makes the discharge



fetor and disagreeable; or some of the joints may be deeply involved, producing so much irritation, as to cause hectic fever and its concomitants. In all these cases the general remedies, are nearly the same, excepting as in all other cases due regard, must be paid to the state of the system. In these cases it may be laid down as a general rule, to which there are undoubtedly exceptions, that the system will not bear the lancet. But if it becomes necessary, from some degree of inflammatory action prevailing in the system, it must be used with caution; pushed too far a dangerous degree of debility, may be induced, which will render it hazardous to the patient.

There is also a more or less degree of derangement of the digestive organs in every case, which shows itself by a depraved or feeble appetite, furred tongue, and other dyspeptic symptoms; and the bowels are either in a loose condition, or im-



moderately distended with faeces. Here most un-
doubtedly in the general plan of treatment, Emol-
lics should not be overlooked. From their acknowl-
edged beneficial effects, in all diseases attended
with derangement of the alimentary canal, and
also their power of exciting to activity, the absor-
bent system, it would ^{not} have been expected that
they should have been so generally overlooked in
this disease. Notwithstanding such is the fact.
In all the authors whose writings I have exam-
ined, they have not been noticed. Dr Chapman
whose accurate and discriminating observations,
purely permits a Symptom, and its appropriate
remedy to pass unnoticed, is the only person, as
far as my knowledge extends, who has recom-
mended the remedy. In these cases I would have
no hesitation, in placing considerable reliance
on their efficacy, and should recommend them
with some degree of confidence.

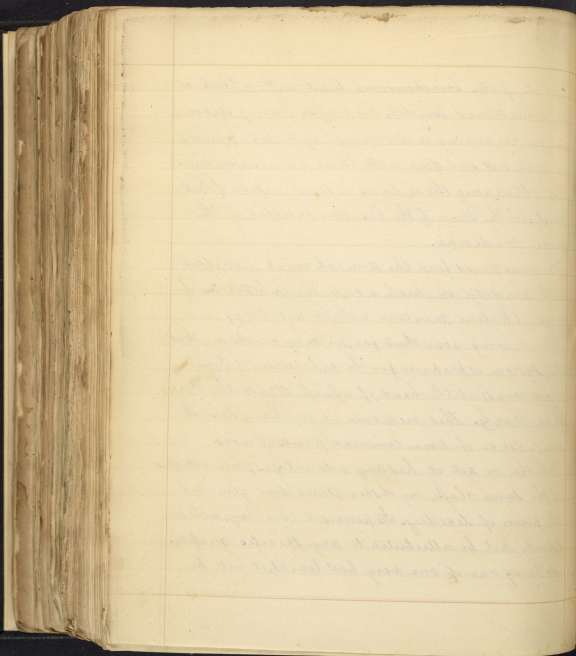
Catharticks have in general been substituted,

and are no doubt very well adapted, are required to be continued until the bowels are thoroughly evacuated. In some cases as the Hip Joint disease, and white swelling, they constitute the treatment, on which our chief reliance is to be placed. On the authority of Dr. Physick, and we would instance for better, patients who were in the greatest degree of debility, and emaciation have been known literally to become fat, under the continued use of active cathartics.

Their *modus operandi*, under such circumstances, has been very happily given by Dr Cox.

If I recollect aright, his opinion is that chronic diseases, require chronic remedies, and that cathartics by their long continuance have an alterative effect, thus giving the system a chance of resuming its healthy functions.

The generality of cases will most probably not require so free a use of purgative medicines. After having completely evacuated the intestinal

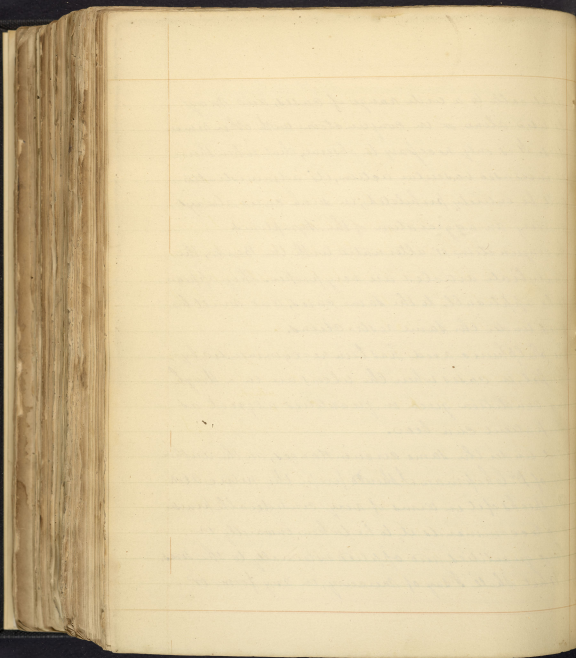


canal of the burthensome load with which it is sometimes loaded, and after having succeeded in procuring a discharge of natural faeces, we may rest satisfied with their administration. For obtaining these ends a combination of Calomel, with some of the laxative articles, is the proper medicine.

We sometimes find the stomach much distressed with acidity; in such a case the exhibition of some alkaline mixture will be necessary.

After having gone thus far, we may conclude that the system is prepared for the exhibition of Tonic medicines; at the head of which stands the Peruvian Bark. This medicine at our time, had the confidence of some eminent practitioners.

Whether or not it has any advantages, over articles of the same class, my observations do not give me the power of deciding. Its powers at this day, will certainly not be attributed to any specific quality. As being one of our very best tonics, it will be

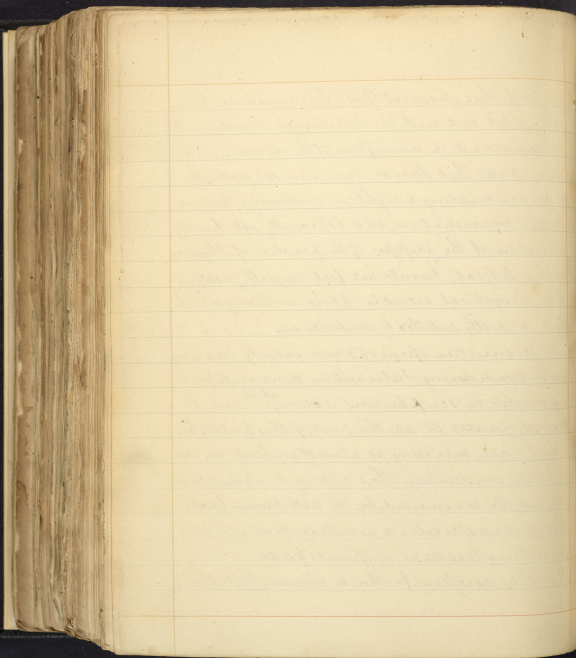


applicable to a wide range of cases, and may be used alone or in conjunction with other remedies. It is only necessary to observe, that when there is increased vascular action, its administration will be entirely prohibited; in such cases always causing an aggravation of the symptoms.

In conjunction or alternated with the Barks, the Chalybeate articles are very proper. They appear to be applicable to the same cases, and must be used under the same restrictions.

The Sulphuric acid has been recommended by Ruffel, in cases when the ulcers are in a sloughing condition given in quantities as great as the patient can bear.

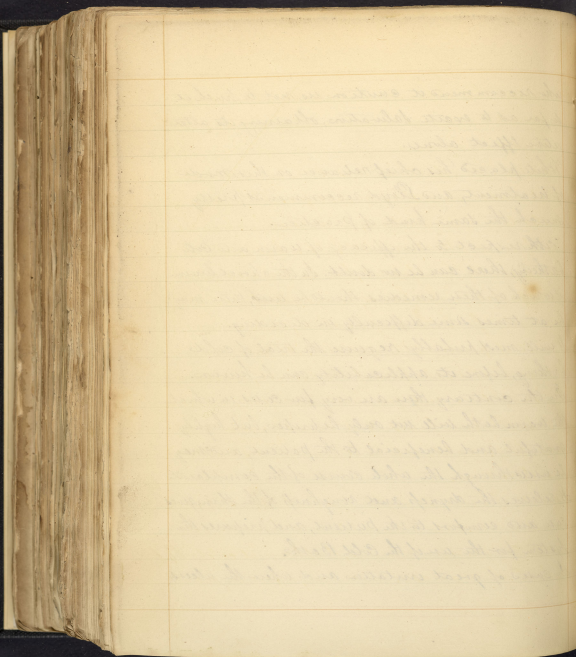
But under the same circumstances, on the authority of Dr. Chapman I should prefer the nitric acid. He speaks of it in terms of very considerable praise and recommends it to be taken inwardly in large quantities, and applied externally to the sores. What shall I say of Mercury, in any form or



stages of this disease? When I commenced this essay, I set out with the determined intention of condemning it in every form of the disease, and anticipated that I would have been supported, by a preponderating weight of authority. But on further examination, and especially after hearing the lecture of the professor of the practice of Physic, on this subject, I would not feel myself justified from theoretical views to oppose authority so high and so justly entitled to confidence.

My speculative opinions were entirely drawn, from considering Tubercular consumption, as caused by scrupulous action, ^{which} opinion I have supported in another part of this paper; In which case, mercury is almost without an exception condemned. This apparent inconsistency can only be reconciled, by the well known fact, that diseases receive a peculiar modification from being located in different parts.

It is only necessary further to observe, that those



who recommend it caution us, not to push it so far as to excite salivations, obtaining its alterative effect alone.

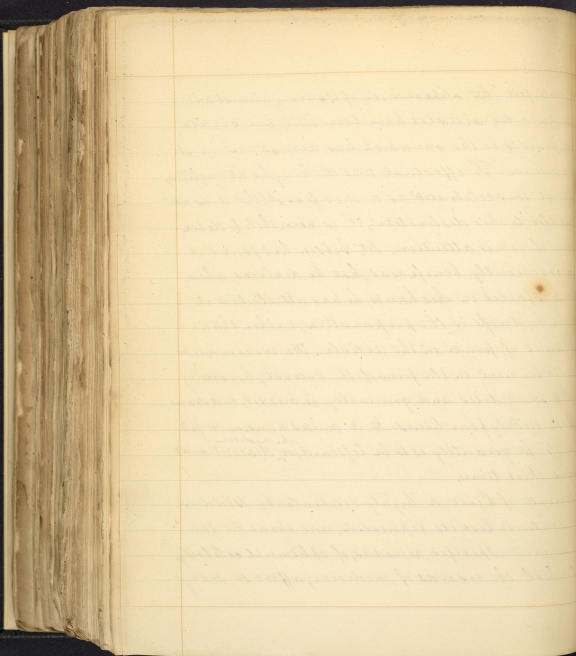
White placed his chief reliance on this mode of treatment, and Lloyd recommends pretty much the same kind of practice.

With respect to the efficacy of warm and cold bathing, there can be no doubt. In the choice however of which of these remedies should be used, there may be at times some difficulty in deciding.

It will most probably require the trial of cold bathing, before its applicability can be known.

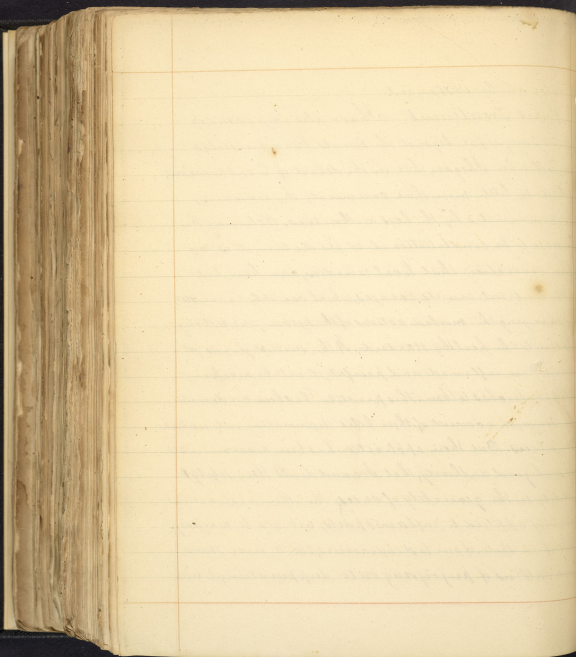
On the contrary, there are very few cases in which the warm bath will not only be proper, but highly grateful and beneficial to the patient, and may be used through the whole course of the complaint. It relieves the dryness and roughness of the skin, gives ease and comfort to the patient, and prepares the system for the use of the Cold Baths.

In cases of great irritation and where the ulcers,



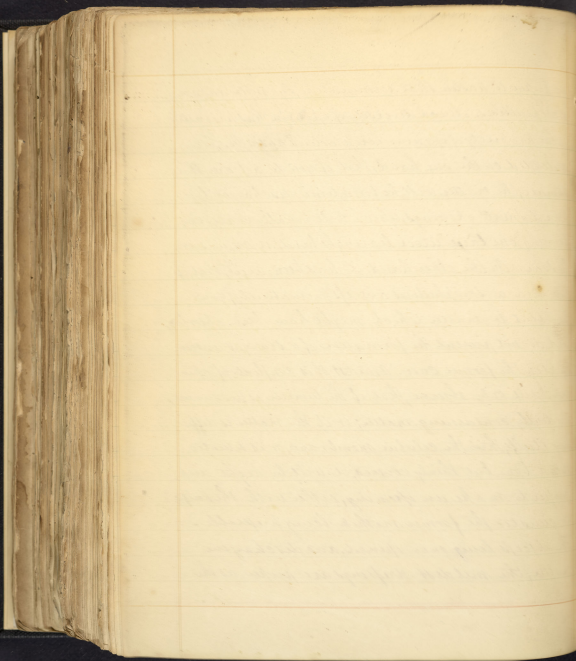
counterfeit the appearance of Cancer, almost all
the narcotic articles have been used, but creta
appears to be the one which has retained the most
confidence. So effectual was it thought at one time,
that it was celebrated as a specific. Altho it is not
entitled to this distinction, it is nevertheless deser-
ving of some attention. Dr. Gilson has found it
so frequently beneficial, that he declares when
it has failed in his hands, he has attributed it
to the badness of the preparation, rather than
a want of power in the article. He recommends
it to be used in the form of the extract, beginning
with small doses and gradually increased, to a dram
in the twenty four hours. If it causes nausea or fed
deness the quantity is to be lessened, or ^{the medicine} discontinued
for a short time.

Muriate of Lime so highly celebrated by Weddow,
has entirely lost its reputation and shares the fate
of all these specific remedies, of ephemeral celebrity,
of which the records of medicine, afford so many.

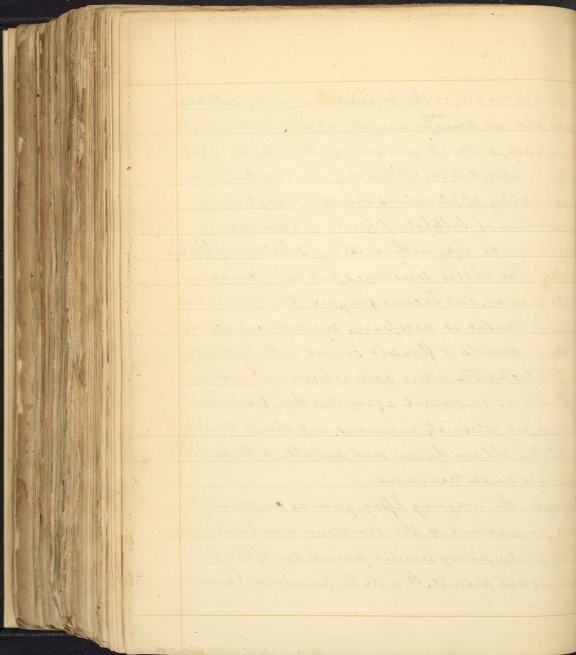


melancholy instances.

Local Treatment: I have already extended this essay, so far beyond the limits I had presented myself when I began, that in the detail of local remedies, I shall do little more than enumerate the remedies, recommended by the best authorities. Believing the disease to be constitutional in its nature, it is my firm conviction that local remedies, can have but little control over its ravages, which can only be arrested, by changing the morbid actions of the system, and restoring its tone to the healthy standard. If the swollen glands or tumors, are inflamed and painful, it will be necessary to apply leeches to them. This practice has been condemned by some, on account of their bites degenerating into unhealthy ulcers. But their application has been recommended by such good authority, that I cannot doubt their safety & utility in the generality of cases. The other applications usually applied to inflamed parts, will also be necessary. But if in spite of our best endeavours, the tumor shows indications of progressing on to suppuration, it will

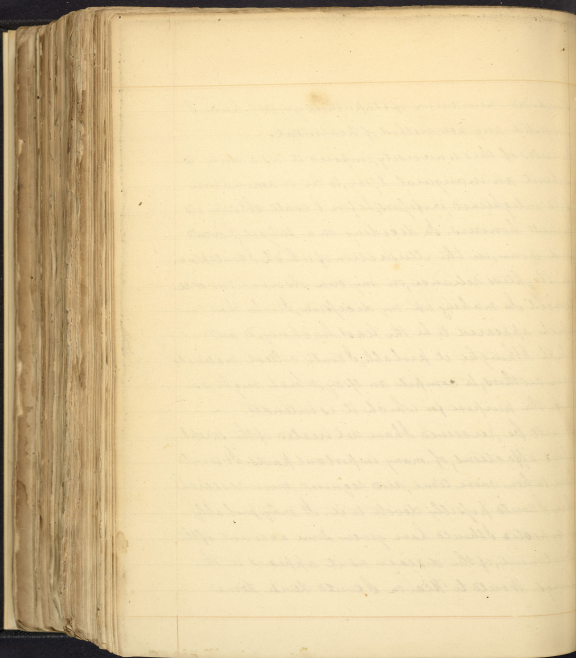


be proper to hasten that termination, by mild and moderate poultices. Much diversity of opinion has prevailed on the propriety of opening scrophulous abscesses, being contended on the one hand, that if you do not open the tumour, the matter will be for a time discharged by several small openings, which will finally coalesce, forming one large ulcer leaving behind it an unseemly scar. On the other hand it has been urged, that if you open a scrophulous abscess prematurely, you give vent to matter which might have been absorbed, and do not prevent the formation of a scar, as unseemly as in the former case. Amidst this conflict of opinion I will only observe, that if the tumour is prominent, evidently containing matter; or if the matter is diffusing itself, thro' the cellular membrane, or is situated over a bone but thinly covered, it will be right and proper to make an opening, either with the knife or caustic the former method being preferable. The abscess being once opened, and discharging matter, the mildest dressings are proper, as the



simplest cerate, or the mildest ointments; cold water
may also at times ^{may} be usefully applied, and if thought
necessary, a small quantity of the acetate of lead
may be added to it. When they are indolent, more
stimulating applications should be applied, as
a solution of Sulphate of Zinc, or a poultice of
Bread made up with a strong solution of Glauber
Salts. The ulcers sometimes put on a cancerous
appearance, and become fungous. Here the applica-
tion of Caustic is necessary; and poultices of clover,
opium, carrots, or flaxseed covered with the powder
of Hemlock. The nitric acid as before mentioned, is
probably as important as any. But these local appli-
cations are extremely numerous, and should be varied
until we obtain the one most suitable to the partic-
ular case under treatment.

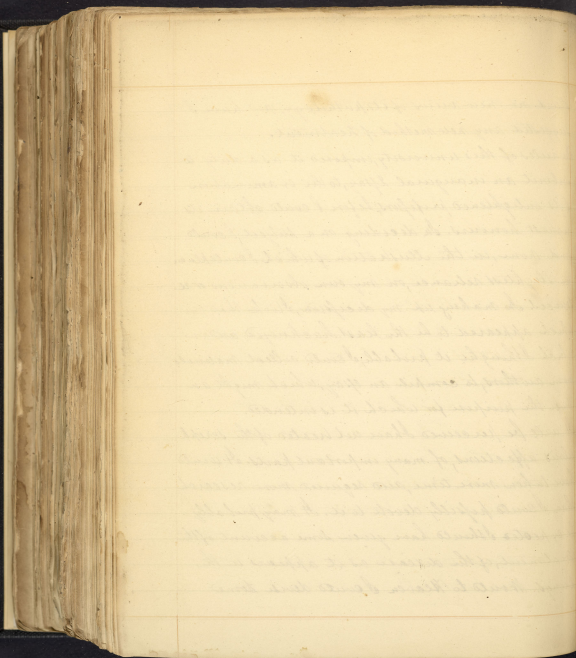
I have in the foregoing Essay, given as condensed &
clear an account, of the symptoms and treatment
of Scrophula, as my limited knowledge of the sub-
ject would permit. It will be perceived I have



offered me new views of its pathology, nor have I suggested any new method of treatment.

The rules of this university, imposed it as a duty to submit an inaugural essay, to the examination of its enlightened professors, before I could obtain its highest honours. In deciding on a subject, I could find none, in the illustration of which I could place the slightest reliance, on my own observations or resources. In making up my decision, I took that one which appeared to be the least hackneyed, and on which I thought it probable, I could collect materials from authors, to compile an essay, which might answer the purpose for which it is intended.

It will be perceived I have not treated of the seraphulous affections, of many important parts. It would have taken more time, and required more research, than I could possibly devote to it. It may probably be expected I should have given some account of the treatment, of the disease as it appears in the Lungs. Would to Heaven I could devise some



method of treatment, that even in a majority of cases would be found successful.

But it ~~is~~ always, sooner or later had a fatal termination. This is a reflection which to the benevolent Physician, is attended with sensations of the most lively regret; not only from the odium it casts on a beloved profession, but from the subjects who are the victims of its unrelenting ravages. They are in a multitude of cases; the daughters of Beauty, the sons of Genius, and the devotees of the Midnight Lamp. And he who is so fortunate as to discover a remedy, whereby it may be robbed of its fatal power, ~~must~~ be crowned with an enviable immortality, and will be allotted a place in the temple of Fame, by the side of the immortal Jenner.

I now submit, this my first essay at medical composition, sensible that here as well as in the examination, I am shortly to undergo the greatest indulgence will be required.

